

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

|               |  |                        |
|---------------|--|------------------------|
| Application:  | 10/552,163   | Confirmation No.: 9197 |
| Applicant(s): | Orlandi, Vittorio  |                        |
| Filing Date:  | June 27, 2006  |                        |
| Examiner:     | Steele, Jennifer A.  |                        |
| Title:        | NON-WOVEN BASED ON EXPLODED OR SPLITTABLE<br>MULTICOMPONENT FIBERS |                        |
| TC/A.U.:      | 1794   |                        |
| Docket No:    | 82062-0177   |                        |
| Customer No.: | <b>24633</b>   |                        |

**MAIL STOP: AMENDMENT**

Commissioner of Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**TRANSMITTAL**

Sir:

Transmitted herewith for filing is an Amendment in response to the Office Action dated **January 26, 2009** in the above-identified application.

- ☐ Applicants petition for an extension of time, the fees for which are set forth in 37 C.F.R. § 1.17(a), for the total number of months checked below:

| <u>Total Months<br/>Requested</u>     | <u>Fee for<br/>Extension of Time</u> |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> first month  | \$ 130.00/ 65.00                     |
| <input type="checkbox"/> second month | \$ 490.00/ 245.00                    |
| <input type="checkbox"/> third month  | \$1,110.00/ 555.00                   |
| <input type="checkbox"/> fourth month | \$1,730.00/ 865.00                   |
| <input type="checkbox"/> fifth month  | \$2,350.00/1,175.00                  |

Extension of time fee due with this request: \$

If an additional extension of time is required, please consider this a Petition therefore.

The fee has been calculated as shown below:

|                              | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE        | ADDIT. FEE |
|------------------------------|---|-------|---------------------------------------|------------------|-------------|------------|
| TOTAL                        | 50  | MINUS | 52                                    | = 0              | X 50/25 =   | \$ 0.00    |
| INDEP.                       | 5   | MINUS | 5                                     | = 0              | X 210/105 = | \$ 0.00    |
|                              |   |       |                                       |                  |             | \$ 0.00    |
|                              |   |       |                                       |                  |             | \$ 0.00    |
| SUB-TOTAL                    |   |       |                                       |                  |             | \$ 0.00    |
| Reduce by ½ for Small Entity |   |       |                                       |                  |             | \$ 0.00    |
| TOTAL                        |   |       |                                       |                  |             | \$ 0.00    |

- ☐ Please charge my Deposit Account No. 50-1349 the amount of **\$0.00**.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1349.
- ☒ Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

**HOGAN & HARTSON LLP**

Dated: April 14, 2009

By: 

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